

GULBARGA INSTITUTE OF MEDICAL SCIENCES, KALBURAGI

Application Form

Ref. No.

Passport size
photo

1.	Name	
2.	Address with mobile Number & E mail	
3.	Age & Date of birth	
4.	Sex	
5.	Martial Status	
6.	Qualification with marks cards	
7.	Religion with caste	
8.	State Nursing Council No.	
9.	Are u from HK Region ?	
10.	Enclosures (Attested copies should be enclosed)	
11.	Fee details	

Declaration :

I hereby declare that above information furnished is true & correct. If found fake, I am liable for criminal prosecution.

Place:

Date :

Signature of Candidate